

National Flood Insurance Program  
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Lanham, MD 20706

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National Flood Insurance Program

# 2006 National Flood Conference Agent Day

Special 1-Day Program for Agents

Tuesday, May 9th, 2006



FEMA



**2006 National Flood Conference**  
May 7th-10th, 2006  
Wyndham Philadelphia at Franklin Plaza  
Philadelphia, Pennsylvania

**Earn Continuing Education credit for attending this one-day event.  
See below for details.\***

**Special 1-Day Program for Agents**  
**Tuesday, May 9th, 2006**

7:00 a.m. – 8:00 a.m.	SFIP 101-Registration
7:00 a.m. – 8:00 a.m.	Continental Breakfast
7:00 a.m. – 8:00 a.m.	Exhibit Hall Open
8:00 a.m. – 11:30 a.m.	"SFIP 101-Coverages, Exclusions and Limitations of the NFIP Policy"
11:30 a.m. – 1:00 p.m.	Exhibit Hall Open
1:00 p.m. – 1:30 p.m.	Elevation Certificate Workshop-Registration
1:30 p.m. – 4:30 p.m.	Elevation Certificate Workshop

\* Agents licensed in DE, MD, NJ and PA will be eligible for 5 Continuing Education credits for attending both sessions.

**Featuring...**

- A comprehensive look at what is covered and isn't covered under the three Standard Flood Insurance Policy Forms
- Potential Errors and Omissions Exposures/Strategies for Avoiding or Addressing
- A detailed overview of the newly revised Elevation Certificate.

**Cost:** Only \$50.00 per person for the 1-day session.

**3 Ways to Register:**

1. Register on-line at [www.nfipstat.com](http://www.nfipstat.com)
2. Complete the attached registration form and mail it with payment to:  
2006 National Flood Conference  
Agent Day  
7700 Hubble Drive  
Lanham, MD 20706
3. Fax your registration form with credit card payment information to:  
2006 National Flood Conference  
Agent Day  
(301) 918-1498

**Registration Form**  
(Copy this form as many times as needed)

First Name MI Last Name

Agency or Company

Address

City State Zip

Telephone Fax Number Email

Make check payable to National Flood Insurance Program, and mail with a copy of this form to:

2006 National Flood Conference  
Agent Day  
7700 Hubble Drive  
Lanham, MD 20706

Check enclosed for \$ \_\_\_\_\_

Or bill my: ☐ Visa ☐ Mastercard and mail to above address, or fax to (301) 918-1498.  
Sorry, no other credit cards accepted.

Credit Card Number: \_\_\_\_\_

Exp. Date \_\_\_\_\_

Amount to be Charged: \$ \_\_\_\_\_

Name as it appears on credit card (please print)

Signature Date

**Questions?** Call Catherine King at 301-918-1439, or send an e-mail to  
[CatherineR.King@associates.dhs.gov](mailto:CatherineR.King@associates.dhs.gov).

**Deadline for Registration: April 28, 2006**